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# UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

## APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

1.  Fee Transmittal Form (e.g., PTO/SB/17) (in duplicate)

(Submit an original, and a duplicate for fee processing)

2.  Applicant claims small entity status.  
See 37 CFR 1.27.3.  Specification [Total Pages 541 ]

(preferred arrangement set forth below)

- Description of the Invention

- Cross Reference to Related Applications

- Statement Regarding Fiduciary Relationship

- Reference to sequence listing, a table,

or a computer program listing appendix

- Background of the Invention

- Brief Summary of the Invention

- Brief Description of the Drawings (if filed)

- Detailed Description

- Claim(s)

- Abstract of the Disclosure

4.  Drawing(s) (35 U.S.C. 113) [Total Sheets 1 ]  
(Figures 1A-1C, and 2)5.  Unexecuted Declaration [Total Pages 2 ]a.  Newly executed (original or copy)  
b.  Copy from a prior application (37 CFR 1.63(d))  
(for continuation/divisional with Box 17 completed)i.  **DELETION OF INVENTOR(S)**Signed statement attached deleting inventor(s) named in  
the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).6.  Application Data Sheet. See 37 CFR 1.76. (2 pages)17. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:
 See Application Data Sheet for priority information  Continuation  Divisional  Continuation-in-Part (CIP) of prior application No: \_\_\_\_\_  
 Prior application Information: Examiner \_\_\_\_\_ Group/Art Unit: \_\_\_\_\_

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference.

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# FEE TRANSMITTAL for FY 2002

Patent fees are subject to annual revision.

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| Application Number     | Unassigned     |
| Filing Date            | Herewith       |
| First Named Inventor   | Viktor ROSCHKE |
| Examiner Name          | Unassigned     |
| Group Art Unit         | Unassigned     |
| Attorney Docket Number | PA004P1        |

| METHOD OF PAYMENT  |                       |                       |          |  | FEE CALCULATION (continued)  |                 |          |          |                       |                       |          |                       |                       |                 |          |     |     |     |    |                                     |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |                           |  |  |  |     |       |     |       |  |  |  |  |     |      |     |      |  |  |  |  |  |        |     |        |   |  |  |  |     |     |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |       |     |     |   |  |  |  |     |       |     |     |  |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |                          |  |  |  |     |       |     |       |  |  |  |  |     |     |     |    |                                  |  |  |  |     |       |     |     |                                    |  |  |  |     |       |     |     |                                |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |                 |  |  |  |     |     |     |     |                               |  |  |  |     |    |     |    |                                     |  |  |  |     |     |     |     |  |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |                           |  |  |  |     |     |     |    |                      |  |  |  |     |   |     |   |   |  |  |  |                      |  |  |  |  |  |  |  |                      |  |  |  |  |  |  |  |                                    |  |  |  |  |                     |  |  |                       |  |  |  |  |                     |  |  |   |  |  |  |  |  |  |  |
|--|-----------------------|-----------------------|----------|--|--|-----------------|----------|----------|-----------------------|-----------------------|----------|-----------------------|-----------------------|-----------------|----------|-----|-----|-----|----|-------------------------------------|--|--|--|-----|----|-----|----|--|--|--|--|-----|-----|-----|-----|---------------------------|--|--|--|-----|-------|-----|-------|--|--|--|--|-----|------|-----|------|--|--|--|--|--|--------|-----|--------|---|--|--|--|-----|-----|-----|----|--|--|--|--|-----|-----|-----|-----|---|--|--|--|-----|-----|-----|-----|--|--|--|--|-----|-------|-----|-----|---|--|--|--|-----|-------|-----|-----|--|--|--|--|-----|-----|-----|-----|------------------|--|--|--|-----|-----|-----|-----|--|--|--|--|-----|-----|-----|-----|--------------------------|--|--|--|-----|-------|-----|-------|--|--|--|--|-----|-----|-----|----|----------------------------------|--|--|--|-----|-------|-----|-----|------------------------------------|--|--|--|-----|-------|-----|-----|--------------------------------|--|--|--|-----|-----|-----|-----|------------------|--|--|--|-----|-----|-----|-----|-----------------|--|--|--|-----|-----|-----|-----|-------------------------------|--|--|--|-----|----|-----|----|-------------------------------------|--|--|--|-----|-----|-----|-----|--|--|--|--|-----|----|-----|----|--|--|--|--|-----|-----|-----|-----|---|--|--|--|-----|-----|-----|-----|--|--|--|--|-----|-----|-----|-----|---|--|--|--|-----|-----|-----|-----|---|--|--|--|-----|-----|-----|-----|---------------------------|--|--|--|-----|-----|-----|----|----------------------|--|--|--|-----|---|-----|---|---|--|--|--|----------------------|--|--|--|--|--|--|--|----------------------|--|--|--|--|--|--|--|------------------------------------|--|--|--|--|---------------------|--|--|-----------------------|--|--|--|--|---------------------|--|--|---|--|--|--|--|--|--|--|
| <p>1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to Deposit Account Number <b>08-3425</b></p> <p>Deposit Account Name <b>Human Genome Sciences, Inc.</b></p> <p><input checked="" type="checkbox"/> Charge Any Additional Fee Required<br/>Under 37 CFR §§ 1.16 and 1.17</p> <p><input type="checkbox"/> Applicant claims small entity status<br/>See 37 CFR 1.27</p> <p>2. <input type="checkbox"/> Payment Enclosed:<br/><input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Other*</p> |                       |                       |          |  | <p>3. <b>ADDITIONAL FEES</b></p> <table border="1"> <thead> <tr> <th>Fee Code</th> <th>Large Entity Fee (\$)</th> <th>Small Entity Fee (\$)</th> <th>Fee Code</th> <th>Large Entity Fee (\$)</th> <th>Small Entity Fee (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr><td>105</td><td>130</td><td>205</td><td>65</td><td colspan="4">Surcharge - late filing fee or oath</td></tr> <tr><td>127</td><td>50</td><td>227</td><td>25</td><td colspan="4">Surcharge - late provisional filing fee or cover sheet</td></tr> <tr><td>139</td><td>130</td><td>139</td><td>130</td><td colspan="4">Non-English specification</td></tr> <tr><td>147</td><td>2,520</td><td>147</td><td>2,520</td><td colspan="4">For filing a request for <i>ex parte</i> reexamination</td></tr> <tr><td>112</td><td>920*</td><td>112</td><td>920*</td><td colspan="4">Requesting publication of SIR prior to Examiner action</td></tr> <tr><td></td><td>1,840*</td><td>113</td><td>1,840*</td><td colspan="4">Requesting publication of SIR after Examiner action</td></tr> <tr><td>115</td><td>110</td><td>215</td><td>55</td><td colspan="4">Extension for reply within first month</td></tr> <tr><td>116</td><td>400</td><td>216</td><td>200</td><td colspan="4">Extension for reply within second month</td></tr> <tr><td>117</td><td>920</td><td>217</td><td>460</td><td colspan="4">Extension for reply within third month</td></tr> <tr><td>118</td><td>1,440</td><td>218</td><td>720</td><td colspan="4">Extension for reply within fourth month</td></tr> <tr><td>128</td><td>1,960</td><td>228</td><td>980</td><td colspan="4">Extension for reply within fifth month</td></tr> <tr><td>119</td><td>320</td><td>219</td><td>160</td><td colspan="4">Notice of appeal</td></tr> <tr><td>120</td><td>320</td><td>220</td><td>160</td><td colspan="4">Filing a brief in support of an appeal</td></tr> <tr><td>121</td><td>280</td><td>221</td><td>140</td><td colspan="4">Request for oral hearing</td></tr> <tr><td>138</td><td>1,510</td><td>138</td><td>1,510</td><td colspan="4">Petition to institute a public use hearing</td></tr> <tr><td>140</td><td>110</td><td>240</td><td>55</td><td colspan="4">Petition to revive - unavoidable</td></tr> <tr><td>141</td><td>1,280</td><td>241</td><td>640</td><td colspan="4">Petition to revive - unintentional</td></tr> <tr><td>142</td><td>1,280</td><td>242</td><td>640</td><td colspan="4">Utility issue fee (or reissue)</td></tr> <tr><td>143</td><td>460</td><td>243</td><td>230</td><td colspan="4">Design issue fee</td></tr> <tr><td>144</td><td>620</td><td>244</td><td>310</td><td colspan="4">Plant issue fee</td></tr> <tr><td>122</td><td>130</td><td>122</td><td>130</td><td colspan="4">Petitions to the Commissioner</td></tr> <tr><td>123</td><td>50</td><td>123</td><td>50</td><td colspan="4">Processing fee under 37 CFR 1.17(q)</td></tr> <tr><td>126</td><td>180</td><td>126</td><td>180</td><td colspan="4">Submission of Information Disclosure Statement</td></tr> <tr><td>581</td><td>40</td><td>581</td><td>40</td><td colspan="4">Recording each patent assignment per property (times number of properties)</td></tr> <tr><td>146</td><td>740</td><td>246</td><td>370</td><td colspan="4">Filing a submission after final rejection (37 CFR § 1.129(a))</td></tr> <tr><td>149</td><td>740</td><td>249</td><td>370</td><td colspan="4">For each additional invention to be examined (37 CFR § 1.129(b))</td></tr> <tr><td>179</td><td>740</td><td>279</td><td>370</td><td colspan="4">Request for Continued Examination (RCE)</td></tr> <tr><td>169</td><td>960</td><td>169</td><td>900</td><td colspan="4">Request for expedited examination of a design application</td></tr> <tr><td>145</td><td>100</td><td>145</td><td>100</td><td colspan="4">Certificate of correction</td></tr> <tr><td>148</td><td>110</td><td>248</td><td>55</td><td colspan="4">Statutory disclaimer</td></tr> <tr><td>561</td><td>3</td><td>561</td><td>3</td><td colspan="4">Printed copy of patent, regular service</td></tr> <tr> <td colspan="5">Other fee (specify).</td> <td colspan="3"></td> </tr> <tr> <td colspan="5">Other fee (specify).</td> <td colspan="3"></td> </tr> <tr> <td colspan="5">* Reduced by Basic Filing Fee Paid</td> <td colspan="3">SUBTOTAL (3) \$0.00</td> </tr> <tr> <td colspan="5">SUBTOTAL (2) \$156.00</td> <td colspan="3">SUBTOTAL (3) \$0.00</td> </tr> <tr> <td colspan="5">** or number previously paid, if greater. For Reissues, see above</td> <td colspan="3"></td> </tr> </tbody> </table> |                 |          | Fee Code | Large Entity Fee (\$) | Small Entity Fee (\$) | Fee Code | Large Entity Fee (\$) | Small Entity Fee (\$) | Fee Description | Fee Paid | 105 | 130 | 205 | 65 | Surcharge - late filing fee or oath |  |  |  | 127 | 50 | 227 | 25 | Surcharge - late provisional filing fee or cover sheet |  |  |  | 139 | 130 | 139 | 130 | Non-English specification |  |  |  | 147 | 2,520 | 147 | 2,520 | For filing a request for <i>ex parte</i> reexamination |  |  |  | 112 | 920* | 112 | 920* | Requesting publication of SIR prior to Examiner action |  |  |  |  | 1,840* | 113 | 1,840* | Requesting publication of SIR after Examiner action |  |  |  | 115 | 110 | 215 | 55 | Extension for reply within first month |  |  |  | 116 | 400 | 216 | 200 | Extension for reply within second month |  |  |  | 117 | 920 | 217 | 460 | Extension for reply within third month |  |  |  | 118 | 1,440 | 218 | 720 | Extension for reply within fourth month |  |  |  | 128 | 1,960 | 228 | 980 | Extension for reply within fifth month |  |  |  | 119 | 320 | 219 | 160 | Notice of appeal |  |  |  | 120 | 320 | 220 | 160 | Filing a brief in support of an appeal |  |  |  | 121 | 280 | 221 | 140 | Request for oral hearing |  |  |  | 138 | 1,510 | 138 | 1,510 | Petition to institute a public use hearing |  |  |  | 140 | 110 | 240 | 55 | Petition to revive - unavoidable |  |  |  | 141 | 1,280 | 241 | 640 | Petition to revive - unintentional |  |  |  | 142 | 1,280 | 242 | 640 | Utility issue fee (or reissue) |  |  |  | 143 | 460 | 243 | 230 | Design issue fee |  |  |  | 144 | 620 | 244 | 310 | Plant issue fee |  |  |  | 122 | 130 | 122 | 130 | Petitions to the Commissioner |  |  |  | 123 | 50 | 123 | 50 | Processing fee under 37 CFR 1.17(q) |  |  |  | 126 | 180 | 126 | 180 | Submission of Information Disclosure Statement |  |  |  | 581 | 40 | 581 | 40 | Recording each patent assignment per property (times number of properties) |  |  |  | 146 | 740 | 246 | 370 | Filing a submission after final rejection (37 CFR § 1.129(a)) |  |  |  | 149 | 740 | 249 | 370 | For each additional invention to be examined (37 CFR § 1.129(b)) |  |  |  | 179 | 740 | 279 | 370 | Request for Continued Examination (RCE) |  |  |  | 169 | 960 | 169 | 900 | Request for expedited examination of a design application |  |  |  | 145 | 100 | 145 | 100 | Certificate of correction |  |  |  | 148 | 110 | 248 | 55 | Statutory disclaimer |  |  |  | 561 | 3 | 561 | 3 | Printed copy of patent, regular service |  |  |  | Other fee (specify). |  |  |  |  |  |  |  | Other fee (specify). |  |  |  |  |  |  |  | * Reduced by Basic Filing Fee Paid |  |  |  |  | SUBTOTAL (3) \$0.00 |  |  | SUBTOTAL (2) \$156.00 |  |  |  |  | SUBTOTAL (3) \$0.00 |  |  | ** or number previously paid, if greater. For Reissues, see above |  |  |  |  |  |  |  |
| Fee Code   | Large Entity Fee (\$) | Small Entity Fee (\$) | Fee Code | Large Entity Fee (\$)  | Small Entity Fee (\$)  | Fee Description | Fee Paid |          |                       |                       |          |                       |                       |                 |          |     |     |     |    |                                     |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |                           |  |  |  |     |       |     |       |  |  |  |  |     |      |     |      |  |  |  |  |  |        |     |        |   |  |  |  |     |     |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |       |     |     |   |  |  |  |     |       |     |     |  |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |                          |  |  |  |     |       |     |       |  |  |  |  |     |     |     |    |                                  |  |  |  |     |       |     |     |                                    |  |  |  |     |       |     |     |                                |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |                 |  |  |  |     |     |     |     |                               |  |  |  |     |    |     |    |                                     |  |  |  |     |     |     |     |  |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |                           |  |  |  |     |     |     |    |                      |  |  |  |     |   |     |   |   |  |  |  |                      |  |  |  |  |  |  |  |                      |  |  |  |  |  |  |  |                                    |  |  |  |  |                     |  |  |                       |  |  |  |  |                     |  |  |   |  |  |  |  |  |  |  |
| 105  | 130                   | 205                   | 65       | Surcharge - late filing fee or oath  |  |                 |          |          |                       |                       |          |                       |                       |                 |          |     |     |     |    |                                     |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |                           |  |  |  |     |       |     |       |  |  |  |  |     |      |     |      |  |  |  |  |  |        |     |        |   |  |  |  |     |     |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |       |     |     |   |  |  |  |     |       |     |     |  |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |                          |  |  |  |     |       |     |       |  |  |  |  |     |     |     |    |                                  |  |  |  |     |       |     |     |                                    |  |  |  |     |       |     |     |                                |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |                 |  |  |  |     |     |     |     |                               |  |  |  |     |    |     |    |                                     |  |  |  |     |     |     |     |  |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |                           |  |  |  |     |     |     |    |                      |  |  |  |     |   |     |   |   |  |  |  |                      |  |  |  |  |  |  |  |                      |  |  |  |  |  |  |  |                                    |  |  |  |  |                     |  |  |                       |  |  |  |  |                     |  |  |   |  |  |  |  |  |  |  |
| 127  | 50                    | 227                   | 25       | Surcharge - late provisional filing fee or cover sheet                     |  |                 |          |          |                       |                       |          |                       |                       |                 |          |     |     |     |    |                                     |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |                           |  |  |  |     |       |     |       |  |  |  |  |     |      |     |      |  |  |  |  |  |        |     |        |   |  |  |  |     |     |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |       |     |     |   |  |  |  |     |       |     |     |  |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |                          |  |  |  |     |       |     |       |  |  |  |  |     |     |     |    |                                  |  |  |  |     |       |     |     |                                    |  |  |  |     |       |     |     |                                |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |                 |  |  |  |     |     |     |     |                               |  |  |  |     |    |     |    |                                     |  |  |  |     |     |     |     |  |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |                           |  |  |  |     |     |     |    |                      |  |  |  |     |   |     |   |   |  |  |  |                      |  |  |  |  |  |  |  |                      |  |  |  |  |  |  |  |                                    |  |  |  |  |                     |  |  |                       |  |  |  |  |                     |  |  |   |  |  |  |  |  |  |  |
| 139  | 130                   | 139                   | 130      | Non-English specification  |  |                 |          |          |                       |                       |          |                       |                       |                 |          |     |     |     |    |                                     |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |                           |  |  |  |     |       |     |       |  |  |  |  |     |      |     |      |  |  |  |  |  |        |     |        |   |  |  |  |     |     |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |       |     |     |   |  |  |  |     |       |     |     |  |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |                          |  |  |  |     |       |     |       |  |  |  |  |     |     |     |    |                                  |  |  |  |     |       |     |     |                                    |  |  |  |     |       |     |     |                                |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |                 |  |  |  |     |     |     |     |                               |  |  |  |     |    |     |    |                                     |  |  |  |     |     |     |     |  |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |                           |  |  |  |     |     |     |    |                      |  |  |  |     |   |     |   |   |  |  |  |                      |  |  |  |  |  |  |  |                      |  |  |  |  |  |  |  |                                    |  |  |  |  |                     |  |  |                       |  |  |  |  |                     |  |  |   |  |  |  |  |  |  |  |
| 147  | 2,520                 | 147                   | 2,520    | For filing a request for <i>ex parte</i> reexamination                     |  |                 |          |          |                       |                       |          |                       |                       |                 |          |     |     |     |    |                                     |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |                           |  |  |  |     |       |     |       |  |  |  |  |     |      |     |      |  |  |  |  |  |        |     |        |   |  |  |  |     |     |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |       |     |     |   |  |  |  |     |       |     |     |  |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |                          |  |  |  |     |       |     |       |  |  |  |  |     |     |     |    |                                  |  |  |  |     |       |     |     |                                    |  |  |  |     |       |     |     |                                |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |                 |  |  |  |     |     |     |     |                               |  |  |  |     |    |     |    |                                     |  |  |  |     |     |     |     |  |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |                           |  |  |  |     |     |     |    |                      |  |  |  |     |   |     |   |   |  |  |  |                      |  |  |  |  |  |  |  |                      |  |  |  |  |  |  |  |                                    |  |  |  |  |                     |  |  |                       |  |  |  |  |                     |  |  |   |  |  |  |  |  |  |  |
| 112  | 920*                  | 112                   | 920*     | Requesting publication of SIR prior to Examiner action                     |  |                 |          |          |                       |                       |          |                       |                       |                 |          |     |     |     |    |                                     |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |                           |  |  |  |     |       |     |       |  |  |  |  |     |      |     |      |  |  |  |  |  |        |     |        |   |  |  |  |     |     |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |       |     |     |   |  |  |  |     |       |     |     |  |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |                          |  |  |  |     |       |     |       |  |  |  |  |     |     |     |    |                                  |  |  |  |     |       |     |     |                                    |  |  |  |     |       |     |     |                                |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |                 |  |  |  |     |     |     |     |                               |  |  |  |     |    |     |    |                                     |  |  |  |     |     |     |     |  |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |                           |  |  |  |     |     |     |    |                      |  |  |  |     |   |     |   |   |  |  |  |                      |  |  |  |  |  |  |  |                      |  |  |  |  |  |  |  |                                    |  |  |  |  |                     |  |  |                       |  |  |  |  |                     |  |  |   |  |  |  |  |  |  |  |
|  | 1,840*                | 113                   | 1,840*   | Requesting publication of SIR after Examiner action                        |  |                 |          |          |                       |                       |          |                       |                       |                 |          |     |     |     |    |                                     |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |                           |  |  |  |     |       |     |       |  |  |  |  |     |      |     |      |  |  |  |  |  |        |     |        |   |  |  |  |     |     |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |       |     |     |   |  |  |  |     |       |     |     |  |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |                          |  |  |  |     |       |     |       |  |  |  |  |     |     |     |    |                                  |  |  |  |     |       |     |     |                                    |  |  |  |     |       |     |     |                                |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |                 |  |  |  |     |     |     |     |                               |  |  |  |     |    |     |    |                                     |  |  |  |     |     |     |     |  |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |                           |  |  |  |     |     |     |    |                      |  |  |  |     |   |     |   |   |  |  |  |                      |  |  |  |  |  |  |  |                      |  |  |  |  |  |  |  |                                    |  |  |  |  |                     |  |  |                       |  |  |  |  |                     |  |  |   |  |  |  |  |  |  |  |
| 115  | 110                   | 215                   | 55       | Extension for reply within first month                                     |  |                 |          |          |                       |                       |          |                       |                       |                 |          |     |     |     |    |                                     |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |                           |  |  |  |     |       |     |       |  |  |  |  |     |      |     |      |  |  |  |  |  |        |     |        |   |  |  |  |     |     |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |       |     |     |   |  |  |  |     |       |     |     |  |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |                          |  |  |  |     |       |     |       |  |  |  |  |     |     |     |    |                                  |  |  |  |     |       |     |     |                                    |  |  |  |     |       |     |     |                                |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |                 |  |  |  |     |     |     |     |                               |  |  |  |     |    |     |    |                                     |  |  |  |     |     |     |     |  |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |                           |  |  |  |     |     |     |    |                      |  |  |  |     |   |     |   |   |  |  |  |                      |  |  |  |  |  |  |  |                      |  |  |  |  |  |  |  |                                    |  |  |  |  |                     |  |  |                       |  |  |  |  |                     |  |  |   |  |  |  |  |  |  |  |
| 116  | 400                   | 216                   | 200      | Extension for reply within second month                                    |  |                 |          |          |                       |                       |          |                       |                       |                 |          |     |     |     |    |                                     |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |                           |  |  |  |     |       |     |       |  |  |  |  |     |      |     |      |  |  |  |  |  |        |     |        |   |  |  |  |     |     |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |       |     |     |   |  |  |  |     |       |     |     |  |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |                          |  |  |  |     |       |     |       |  |  |  |  |     |     |     |    |                                  |  |  |  |     |       |     |     |                                    |  |  |  |     |       |     |     |                                |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |                 |  |  |  |     |     |     |     |                               |  |  |  |     |    |     |    |                                     |  |  |  |     |     |     |     |  |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |                           |  |  |  |     |     |     |    |                      |  |  |  |     |   |     |   |   |  |  |  |                      |  |  |  |  |  |  |  |                      |  |  |  |  |  |  |  |                                    |  |  |  |  |                     |  |  |                       |  |  |  |  |                     |  |  |   |  |  |  |  |  |  |  |
| 117  | 920                   | 217                   | 460      | Extension for reply within third month                                     |  |                 |          |          |                       |                       |          |                       |                       |                 |          |     |     |     |    |                                     |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |                           |  |  |  |     |       |     |       |  |  |  |  |     |      |     |      |  |  |  |  |  |        |     |        |   |  |  |  |     |     |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |       |     |     |   |  |  |  |     |       |     |     |  |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |                          |  |  |  |     |       |     |       |  |  |  |  |     |     |     |    |                                  |  |  |  |     |       |     |     |                                    |  |  |  |     |       |     |     |                                |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |                 |  |  |  |     |     |     |     |                               |  |  |  |     |    |     |    |                                     |  |  |  |     |     |     |     |  |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |                           |  |  |  |     |     |     |    |                      |  |  |  |     |   |     |   |   |  |  |  |                      |  |  |  |  |  |  |  |                      |  |  |  |  |  |  |  |                                    |  |  |  |  |                     |  |  |                       |  |  |  |  |                     |  |  |   |  |  |  |  |  |  |  |
| 118  | 1,440                 | 218                   | 720      | Extension for reply within fourth month                                    |  |                 |          |          |                       |                       |          |                       |                       |                 |          |     |     |     |    |                                     |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |                           |  |  |  |     |       |     |       |  |  |  |  |     |      |     |      |  |  |  |  |  |        |     |        |   |  |  |  |     |     |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |       |     |     |   |  |  |  |     |       |     |     |  |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |                          |  |  |  |     |       |     |       |  |  |  |  |     |     |     |    |                                  |  |  |  |     |       |     |     |                                    |  |  |  |     |       |     |     |                                |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |                 |  |  |  |     |     |     |     |                               |  |  |  |     |    |     |    |                                     |  |  |  |     |     |     |     |  |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |                           |  |  |  |     |     |     |    |                      |  |  |  |     |   |     |   |   |  |  |  |                      |  |  |  |  |  |  |  |                      |  |  |  |  |  |  |  |                                    |  |  |  |  |                     |  |  |                       |  |  |  |  |                     |  |  |   |  |  |  |  |  |  |  |
| 128  | 1,960                 | 228                   | 980      | Extension for reply within fifth month                                     |  |                 |          |          |                       |                       |          |                       |                       |                 |          |     |     |     |    |                                     |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |                           |  |  |  |     |       |     |       |  |  |  |  |     |      |     |      |  |  |  |  |  |        |     |        |   |  |  |  |     |     |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |       |     |     |   |  |  |  |     |       |     |     |  |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |                          |  |  |  |     |       |     |       |  |  |  |  |     |     |     |    |                                  |  |  |  |     |       |     |     |                                    |  |  |  |     |       |     |     |                                |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |                 |  |  |  |     |     |     |     |                               |  |  |  |     |    |     |    |                                     |  |  |  |     |     |     |     |  |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |                           |  |  |  |     |     |     |    |                      |  |  |  |     |   |     |   |   |  |  |  |                      |  |  |  |  |  |  |  |                      |  |  |  |  |  |  |  |                                    |  |  |  |  |                     |  |  |                       |  |  |  |  |                     |  |  |   |  |  |  |  |  |  |  |
| 119  | 320                   | 219                   | 160      | Notice of appeal   |  |                 |          |          |                       |                       |          |                       |                       |                 |          |     |     |     |    |                                     |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |                           |  |  |  |     |       |     |       |  |  |  |  |     |      |     |      |  |  |  |  |  |        |     |        |   |  |  |  |     |     |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |       |     |     |   |  |  |  |     |       |     |     |  |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |                          |  |  |  |     |       |     |       |  |  |  |  |     |     |     |    |                                  |  |  |  |     |       |     |     |                                    |  |  |  |     |       |     |     |                                |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |                 |  |  |  |     |     |     |     |                               |  |  |  |     |    |     |    |                                     |  |  |  |     |     |     |     |  |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |                           |  |  |  |     |     |     |    |                      |  |  |  |     |   |     |   |   |  |  |  |                      |  |  |  |  |  |  |  |                      |  |  |  |  |  |  |  |                                    |  |  |  |  |                     |  |  |                       |  |  |  |  |                     |  |  |   |  |  |  |  |  |  |  |
| 120  | 320                   | 220                   | 160      | Filing a brief in support of an appeal                                     |  |                 |          |          |                       |                       |          |                       |                       |                 |          |     |     |     |    |                                     |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |                           |  |  |  |     |       |     |       |  |  |  |  |     |      |     |      |  |  |  |  |  |        |     |        |   |  |  |  |     |     |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |       |     |     |   |  |  |  |     |       |     |     |  |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |                          |  |  |  |     |       |     |       |  |  |  |  |     |     |     |    |                                  |  |  |  |     |       |     |     |                                    |  |  |  |     |       |     |     |                                |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |                 |  |  |  |     |     |     |     |                               |  |  |  |     |    |     |    |                                     |  |  |  |     |     |     |     |  |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |                           |  |  |  |     |     |     |    |                      |  |  |  |     |   |     |   |   |  |  |  |                      |  |  |  |  |  |  |  |                      |  |  |  |  |  |  |  |                                    |  |  |  |  |                     |  |  |                       |  |  |  |  |                     |  |  |   |  |  |  |  |  |  |  |
| 121  | 280                   | 221                   | 140      | Request for oral hearing   |  |                 |          |          |                       |                       |          |                       |                       |                 |          |     |     |     |    |                                     |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |                           |  |  |  |     |       |     |       |  |  |  |  |     |      |     |      |  |  |  |  |  |        |     |        |   |  |  |  |     |     |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |       |     |     |   |  |  |  |     |       |     |     |  |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |                          |  |  |  |     |       |     |       |  |  |  |  |     |     |     |    |                                  |  |  |  |     |       |     |     |                                    |  |  |  |     |       |     |     |                                |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |                 |  |  |  |     |     |     |     |                               |  |  |  |     |    |     |    |                                     |  |  |  |     |     |     |     |  |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |                           |  |  |  |     |     |     |    |                      |  |  |  |     |   |     |   |   |  |  |  |                      |  |  |  |  |  |  |  |                      |  |  |  |  |  |  |  |                                    |  |  |  |  |                     |  |  |                       |  |  |  |  |                     |  |  |   |  |  |  |  |  |  |  |
| 138  | 1,510                 | 138                   | 1,510    | Petition to institute a public use hearing                                 |  |                 |          |          |                       |                       |          |                       |                       |                 |          |     |     |     |    |                                     |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |                           |  |  |  |     |       |     |       |  |  |  |  |     |      |     |      |  |  |  |  |  |        |     |        |   |  |  |  |     |     |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |       |     |     |   |  |  |  |     |       |     |     |  |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |                          |  |  |  |     |       |     |       |  |  |  |  |     |     |     |    |                                  |  |  |  |     |       |     |     |                                    |  |  |  |     |       |     |     |                                |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |                 |  |  |  |     |     |     |     |                               |  |  |  |     |    |     |    |                                     |  |  |  |     |     |     |     |  |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |                           |  |  |  |     |     |     |    |                      |  |  |  |     |   |     |   |   |  |  |  |                      |  |  |  |  |  |  |  |                      |  |  |  |  |  |  |  |                                    |  |  |  |  |                     |  |  |                       |  |  |  |  |                     |  |  |   |  |  |  |  |  |  |  |
| 140  | 110                   | 240                   | 55       | Petition to revive - unavoidable   |  |                 |          |          |                       |                       |          |                       |                       |                 |          |     |     |     |    |                                     |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |                           |  |  |  |     |       |     |       |  |  |  |  |     |      |     |      |  |  |  |  |  |        |     |        |   |  |  |  |     |     |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |       |     |     |   |  |  |  |     |       |     |     |  |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |                          |  |  |  |     |       |     |       |  |  |  |  |     |     |     |    |                                  |  |  |  |     |       |     |     |                                    |  |  |  |     |       |     |     |                                |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |                 |  |  |  |     |     |     |     |                               |  |  |  |     |    |     |    |                                     |  |  |  |     |     |     |     |  |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |                           |  |  |  |     |     |     |    |                      |  |  |  |     |   |     |   |   |  |  |  |                      |  |  |  |  |  |  |  |                      |  |  |  |  |  |  |  |                                    |  |  |  |  |                     |  |  |                       |  |  |  |  |                     |  |  |   |  |  |  |  |  |  |  |
| 141  | 1,280                 | 241                   | 640      | Petition to revive - unintentional   |  |                 |          |          |                       |                       |          |                       |                       |                 |          |     |     |     |    |                                     |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |                           |  |  |  |     |       |     |       |  |  |  |  |     |      |     |      |  |  |  |  |  |        |     |        |   |  |  |  |     |     |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |       |     |     |   |  |  |  |     |       |     |     |  |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |                          |  |  |  |     |       |     |       |  |  |  |  |     |     |     |    |                                  |  |  |  |     |       |     |     |                                    |  |  |  |     |       |     |     |                                |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |                 |  |  |  |     |     |     |     |                               |  |  |  |     |    |     |    |                                     |  |  |  |     |     |     |     |  |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |                           |  |  |  |     |     |     |    |                      |  |  |  |     |   |     |   |   |  |  |  |                      |  |  |  |  |  |  |  |                      |  |  |  |  |  |  |  |                                    |  |  |  |  |                     |  |  |                       |  |  |  |  |                     |  |  |   |  |  |  |  |  |  |  |
| 142  | 1,280                 | 242                   | 640      | Utility issue fee (or reissue)   |  |                 |          |          |                       |                       |          |                       |                       |                 |          |     |     |     |    |                                     |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |                           |  |  |  |     |       |     |       |  |  |  |  |     |      |     |      |  |  |  |  |  |        |     |        |   |  |  |  |     |     |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |       |     |     |   |  |  |  |     |       |     |     |  |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |                          |  |  |  |     |       |     |       |  |  |  |  |     |     |     |    |                                  |  |  |  |     |       |     |     |                                    |  |  |  |     |       |     |     |                                |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |                 |  |  |  |     |     |     |     |                               |  |  |  |     |    |     |    |                                     |  |  |  |     |     |     |     |  |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |                           |  |  |  |     |     |     |    |                      |  |  |  |     |   |     |   |   |  |  |  |                      |  |  |  |  |  |  |  |                      |  |  |  |  |  |  |  |                                    |  |  |  |  |                     |  |  |                       |  |  |  |  |                     |  |  |   |  |  |  |  |  |  |  |
| 143  | 460                   | 243                   | 230      | Design issue fee   |  |                 |          |          |                       |                       |          |                       |                       |                 |          |     |     |     |    |                                     |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |                           |  |  |  |     |       |     |       |  |  |  |  |     |      |     |      |  |  |  |  |  |        |     |        |   |  |  |  |     |     |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |       |     |     |   |  |  |  |     |       |     |     |  |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |                          |  |  |  |     |       |     |       |  |  |  |  |     |     |     |    |                                  |  |  |  |     |       |     |     |                                    |  |  |  |     |       |     |     |                                |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |                 |  |  |  |     |     |     |     |                               |  |  |  |     |    |     |    |                                     |  |  |  |     |     |     |     |  |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |                           |  |  |  |     |     |     |    |                      |  |  |  |     |   |     |   |   |  |  |  |                      |  |  |  |  |  |  |  |                      |  |  |  |  |  |  |  |                                    |  |  |  |  |                     |  |  |                       |  |  |  |  |                     |  |  |   |  |  |  |  |  |  |  |
| 144  | 620                   | 244                   | 310      | Plant issue fee  |  |                 |          |          |                       |                       |          |                       |                       |                 |          |     |     |     |    |                                     |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |                           |  |  |  |     |       |     |       |  |  |  |  |     |      |     |      |  |  |  |  |  |        |     |        |   |  |  |  |     |     |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |       |     |     |   |  |  |  |     |       |     |     |  |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |                          |  |  |  |     |       |     |       |  |  |  |  |     |     |     |    |                                  |  |  |  |     |       |     |     |                                    |  |  |  |     |       |     |     |                                |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |                 |  |  |  |     |     |     |     |                               |  |  |  |     |    |     |    |                                     |  |  |  |     |     |     |     |  |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |                           |  |  |  |     |     |     |    |                      |  |  |  |     |   |     |   |   |  |  |  |                      |  |  |  |  |  |  |  |                      |  |  |  |  |  |  |  |                                    |  |  |  |  |                     |  |  |                       |  |  |  |  |                     |  |  |   |  |  |  |  |  |  |  |
| 122  | 130                   | 122                   | 130      | Petitions to the Commissioner  |  |                 |          |          |                       |                       |          |                       |                       |                 |          |     |     |     |    |                                     |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |                           |  |  |  |     |       |     |       |  |  |  |  |     |      |     |      |  |  |  |  |  |        |     |        |   |  |  |  |     |     |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |       |     |     |   |  |  |  |     |       |     |     |  |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |                          |  |  |  |     |       |     |       |  |  |  |  |     |     |     |    |                                  |  |  |  |     |       |     |     |                                    |  |  |  |     |       |     |     |                                |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |                 |  |  |  |     |     |     |     |                               |  |  |  |     |    |     |    |                                     |  |  |  |     |     |     |     |  |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |                           |  |  |  |     |     |     |    |                      |  |  |  |     |   |     |   |   |  |  |  |                      |  |  |  |  |  |  |  |                      |  |  |  |  |  |  |  |                                    |  |  |  |  |                     |  |  |                       |  |  |  |  |                     |  |  |   |  |  |  |  |  |  |  |
| 123  | 50                    | 123                   | 50       | Processing fee under 37 CFR 1.17(q)  |  |                 |          |          |                       |                       |          |                       |                       |                 |          |     |     |     |    |                                     |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |                           |  |  |  |     |       |     |       |  |  |  |  |     |      |     |      |  |  |  |  |  |        |     |        |   |  |  |  |     |     |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |       |     |     |   |  |  |  |     |       |     |     |  |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |                          |  |  |  |     |       |     |       |  |  |  |  |     |     |     |    |                                  |  |  |  |     |       |     |     |                                    |  |  |  |     |       |     |     |                                |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |                 |  |  |  |     |     |     |     |                               |  |  |  |     |    |     |    |                                     |  |  |  |     |     |     |     |  |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |                           |  |  |  |     |     |     |    |                      |  |  |  |     |   |     |   |   |  |  |  |                      |  |  |  |  |  |  |  |                      |  |  |  |  |  |  |  |                                    |  |  |  |  |                     |  |  |                       |  |  |  |  |                     |  |  |   |  |  |  |  |  |  |  |
| 126  | 180                   | 126                   | 180      | Submission of Information Disclosure Statement                             |  |                 |          |          |                       |                       |          |                       |                       |                 |          |     |     |     |    |                                     |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |                           |  |  |  |     |       |     |       |  |  |  |  |     |      |     |      |  |  |  |  |  |        |     |        |   |  |  |  |     |     |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |       |     |     |   |  |  |  |     |       |     |     |  |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |                          |  |  |  |     |       |     |       |  |  |  |  |     |     |     |    |                                  |  |  |  |     |       |     |     |                                    |  |  |  |     |       |     |     |                                |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |                 |  |  |  |     |     |     |     |                               |  |  |  |     |    |     |    |                                     |  |  |  |     |     |     |     |  |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |                           |  |  |  |     |     |     |    |                      |  |  |  |     |   |     |   |   |  |  |  |                      |  |  |  |  |  |  |  |                      |  |  |  |  |  |  |  |                                    |  |  |  |  |                     |  |  |                       |  |  |  |  |                     |  |  |   |  |  |  |  |  |  |  |
| 581  | 40                    | 581                   | 40       | Recording each patent assignment per property (times number of properties) |  |                 |          |          |                       |                       |          |                       |                       |                 |          |     |     |     |    |                                     |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |                           |  |  |  |     |       |     |       |  |  |  |  |     |      |     |      |  |  |  |  |  |        |     |        |   |  |  |  |     |     |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |       |     |     |   |  |  |  |     |       |     |     |  |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |                          |  |  |  |     |       |     |       |  |  |  |  |     |     |     |    |                                  |  |  |  |     |       |     |     |                                    |  |  |  |     |       |     |     |                                |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |                 |  |  |  |     |     |     |     |                               |  |  |  |     |    |     |    |                                     |  |  |  |     |     |     |     |  |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |                           |  |  |  |     |     |     |    |                      |  |  |  |     |   |     |   |   |  |  |  |                      |  |  |  |  |  |  |  |                      |  |  |  |  |  |  |  |                                    |  |  |  |  |                     |  |  |                       |  |  |  |  |                     |  |  |   |  |  |  |  |  |  |  |
| 146  | 740                   | 246                   | 370      | Filing a submission after final rejection (37 CFR § 1.129(a))              |  |                 |          |          |                       |                       |          |                       |                       |                 |          |     |     |     |    |                                     |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |                           |  |  |  |     |       |     |       |  |  |  |  |     |      |     |      |  |  |  |  |  |        |     |        |   |  |  |  |     |     |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |       |     |     |   |  |  |  |     |       |     |     |  |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |                          |  |  |  |     |       |     |       |  |  |  |  |     |     |     |    |                                  |  |  |  |     |       |     |     |                                    |  |  |  |     |       |     |     |                                |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |                 |  |  |  |     |     |     |     |                               |  |  |  |     |    |     |    |                                     |  |  |  |     |     |     |     |  |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |                           |  |  |  |     |     |     |    |                      |  |  |  |     |   |     |   |   |  |  |  |                      |  |  |  |  |  |  |  |                      |  |  |  |  |  |  |  |                                    |  |  |  |  |                     |  |  |                       |  |  |  |  |                     |  |  |   |  |  |  |  |  |  |  |
| 149  | 740                   | 249                   | 370      | For each additional invention to be examined (37 CFR § 1.129(b))           |  |                 |          |          |                       |                       |          |                       |                       |                 |          |     |     |     |    |                                     |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |                           |  |  |  |     |       |     |       |  |  |  |  |     |      |     |      |  |  |  |  |  |        |     |        |   |  |  |  |     |     |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |       |     |     |   |  |  |  |     |       |     |     |  |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |                          |  |  |  |     |       |     |       |  |  |  |  |     |     |     |    |                                  |  |  |  |     |       |     |     |                                    |  |  |  |     |       |     |     |                                |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |                 |  |  |  |     |     |     |     |                               |  |  |  |     |    |     |    |                                     |  |  |  |     |     |     |     |  |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |                           |  |  |  |     |     |     |    |                      |  |  |  |     |   |     |   |   |  |  |  |                      |  |  |  |  |  |  |  |                      |  |  |  |  |  |  |  |                                    |  |  |  |  |                     |  |  |                       |  |  |  |  |                     |  |  |   |  |  |  |  |  |  |  |
| 179  | 740                   | 279                   | 370      | Request for Continued Examination (RCE)                                    |  |                 |          |          |                       |                       |          |                       |                       |                 |          |     |     |     |    |                                     |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |                           |  |  |  |     |       |     |       |  |  |  |  |     |      |     |      |  |  |  |  |  |        |     |        |   |  |  |  |     |     |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |       |     |     |   |  |  |  |     |       |     |     |  |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |                          |  |  |  |     |       |     |       |  |  |  |  |     |     |     |    |                                  |  |  |  |     |       |     |     |                                    |  |  |  |     |       |     |     |                                |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |                 |  |  |  |     |     |     |     |                               |  |  |  |     |    |     |    |                                     |  |  |  |     |     |     |     |  |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |                           |  |  |  |     |     |     |    |                      |  |  |  |     |   |     |   |   |  |  |  |                      |  |  |  |  |  |  |  |                      |  |  |  |  |  |  |  |                                    |  |  |  |  |                     |  |  |                       |  |  |  |  |                     |  |  |   |  |  |  |  |  |  |  |
| 169  | 960                   | 169                   | 900      | Request for expedited examination of a design application                  |  |                 |          |          |                       |                       |          |                       |                       |                 |          |     |     |     |    |                                     |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |                           |  |  |  |     |       |     |       |  |  |  |  |     |      |     |      |  |  |  |  |  |        |     |        |   |  |  |  |     |     |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |       |     |     |   |  |  |  |     |       |     |     |  |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |                          |  |  |  |     |       |     |       |  |  |  |  |     |     |     |    |                                  |  |  |  |     |       |     |     |                                    |  |  |  |     |       |     |     |                                |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |                 |  |  |  |     |     |     |     |                               |  |  |  |     |    |     |    |                                     |  |  |  |     |     |     |     |  |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |                           |  |  |  |     |     |     |    |                      |  |  |  |     |   |     |   |   |  |  |  |                      |  |  |  |  |  |  |  |                      |  |  |  |  |  |  |  |                                    |  |  |  |  |                     |  |  |                       |  |  |  |  |                     |  |  |   |  |  |  |  |  |  |  |
| 145  | 100                   | 145                   | 100      | Certificate of correction  |  |                 |          |          |                       |                       |          |                       |                       |                 |          |     |     |     |    |                                     |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |                           |  |  |  |     |       |     |       |  |  |  |  |     |      |     |      |  |  |  |  |  |        |     |        |   |  |  |  |     |     |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |       |     |     |   |  |  |  |     |       |     |     |  |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |                          |  |  |  |     |       |     |       |  |  |  |  |     |     |     |    |                                  |  |  |  |     |       |     |     |                                    |  |  |  |     |       |     |     |                                |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |                 |  |  |  |     |     |     |     |                               |  |  |  |     |    |     |    |                                     |  |  |  |     |     |     |     |  |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |                           |  |  |  |     |     |     |    |                      |  |  |  |     |   |     |   |   |  |  |  |                      |  |  |  |  |  |  |  |                      |  |  |  |  |  |  |  |                                    |  |  |  |  |                     |  |  |                       |  |  |  |  |                     |  |  |   |  |  |  |  |  |  |  |
| 148  | 110                   | 248                   | 55       | Statutory disclaimer   |  |                 |          |          |                       |                       |          |                       |                       |                 |          |     |     |     |    |                                     |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |                           |  |  |  |     |       |     |       |  |  |  |  |     |      |     |      |  |  |  |  |  |        |     |        |   |  |  |  |     |     |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |       |     |     |   |  |  |  |     |       |     |     |  |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |                          |  |  |  |     |       |     |       |  |  |  |  |     |     |     |    |                                  |  |  |  |     |       |     |     |                                    |  |  |  |     |       |     |     |                                |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |                 |  |  |  |     |     |     |     |                               |  |  |  |     |    |     |    |                                     |  |  |  |     |     |     |     |  |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |                           |  |  |  |     |     |     |    |                      |  |  |  |     |   |     |   |   |  |  |  |                      |  |  |  |  |  |  |  |                      |  |  |  |  |  |  |  |                                    |  |  |  |  |                     |  |  |                       |  |  |  |  |                     |  |  |   |  |  |  |  |  |  |  |
| 561  | 3                     | 561                   | 3        | Printed copy of patent, regular service                                    |  |                 |          |          |                       |                       |          |                       |                       |                 |          |     |     |     |    |                                     |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |                           |  |  |  |     |       |     |       |  |  |  |  |     |      |     |      |  |  |  |  |  |        |     |        |   |  |  |  |     |     |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |       |     |     |   |  |  |  |     |       |     |     |  |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |                          |  |  |  |     |       |     |       |  |  |  |  |     |     |     |    |                                  |  |  |  |     |       |     |     |                                    |  |  |  |     |       |     |     |                                |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |                 |  |  |  |     |     |     |     |                               |  |  |  |     |    |     |    |                                     |  |  |  |     |     |     |     |  |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |                           |  |  |  |     |     |     |    |                      |  |  |  |     |   |     |   |   |  |  |  |                      |  |  |  |  |  |  |  |                      |  |  |  |  |  |  |  |                                    |  |  |  |  |                     |  |  |                       |  |  |  |  |                     |  |  |   |  |  |  |  |  |  |  |
| Other fee (specify).   |                       |                       |          |  |  |                 |          |          |                       |                       |          |                       |                       |                 |          |     |     |     |    |                                     |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |                           |  |  |  |     |       |     |       |  |  |  |  |     |      |     |      |  |  |  |  |  |        |     |        |   |  |  |  |     |     |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |       |     |     |   |  |  |  |     |       |     |     |  |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |                          |  |  |  |     |       |     |       |  |  |  |  |     |     |     |    |                                  |  |  |  |     |       |     |     |                                    |  |  |  |     |       |     |     |                                |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |                 |  |  |  |     |     |     |     |                               |  |  |  |     |    |     |    |                                     |  |  |  |     |     |     |     |  |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |                           |  |  |  |     |     |     |    |                      |  |  |  |     |   |     |   |   |  |  |  |                      |  |  |  |  |  |  |  |                      |  |  |  |  |  |  |  |                                    |  |  |  |  |                     |  |  |                       |  |  |  |  |                     |  |  |   |  |  |  |  |  |  |  |
| Other fee (specify).   |                       |                       |          |  |  |                 |          |          |                       |                       |          |                       |                       |                 |          |     |     |     |    |                                     |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |                           |  |  |  |     |       |     |       |  |  |  |  |     |      |     |      |  |  |  |  |  |        |     |        |   |  |  |  |     |     |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |       |     |     |   |  |  |  |     |       |     |     |  |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |                          |  |  |  |     |       |     |       |  |  |  |  |     |     |     |    |                                  |  |  |  |     |       |     |     |                                    |  |  |  |     |       |     |     |                                |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |                 |  |  |  |     |     |     |     |                               |  |  |  |     |    |     |    |                                     |  |  |  |     |     |     |     |  |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |                           |  |  |  |     |     |     |    |                      |  |  |  |     |   |     |   |   |  |  |  |                      |  |  |  |  |  |  |  |                      |  |  |  |  |  |  |  |                                    |  |  |  |  |                     |  |  |                       |  |  |  |  |                     |  |  |   |  |  |  |  |  |  |  |
| * Reduced by Basic Filing Fee Paid   |                       |                       |          |  | SUBTOTAL (3) \$0.00  |                 |          |          |                       |                       |          |                       |                       |                 |          |     |     |     |    |                                     |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |                           |  |  |  |     |       |     |       |  |  |  |  |     |      |     |      |  |  |  |  |  |        |     |        |   |  |  |  |     |     |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |       |     |     |   |  |  |  |     |       |     |     |  |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |                          |  |  |  |     |       |     |       |  |  |  |  |     |     |     |    |                                  |  |  |  |     |       |     |     |                                    |  |  |  |     |       |     |     |                                |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |                 |  |  |  |     |     |     |     |                               |  |  |  |     |    |     |    |                                     |  |  |  |     |     |     |     |  |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |                           |  |  |  |     |     |     |    |                      |  |  |  |     |   |     |   |   |  |  |  |                      |  |  |  |  |  |  |  |                      |  |  |  |  |  |  |  |                                    |  |  |  |  |                     |  |  |                       |  |  |  |  |                     |  |  |   |  |  |  |  |  |  |  |
| SUBTOTAL (2) \$156.00  |                       |                       |          |  | SUBTOTAL (3) \$0.00  |                 |          |          |                       |                       |          |                       |                       |                 |          |     |     |     |    |                                     |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |                           |  |  |  |     |       |     |       |  |  |  |  |     |      |     |      |  |  |  |  |  |        |     |        |   |  |  |  |     |     |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |       |     |     |   |  |  |  |     |       |     |     |  |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |                          |  |  |  |     |       |     |       |  |  |  |  |     |     |     |    |                                  |  |  |  |     |       |     |     |                                    |  |  |  |     |       |     |     |                                |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |                 |  |  |  |     |     |     |     |                               |  |  |  |     |    |     |    |                                     |  |  |  |     |     |     |     |  |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |                           |  |  |  |     |     |     |    |                      |  |  |  |     |   |     |   |   |  |  |  |                      |  |  |  |  |  |  |  |                      |  |  |  |  |  |  |  |                                    |  |  |  |  |                     |  |  |                       |  |  |  |  |                     |  |  |   |  |  |  |  |  |  |  |
| ** or number previously paid, if greater. For Reissues, see above  |                       |                       |          |  |  |                 |          |          |                       |                       |          |                       |                       |                 |          |     |     |     |    |                                     |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |                           |  |  |  |     |       |     |       |  |  |  |  |     |      |     |      |  |  |  |  |  |        |     |        |   |  |  |  |     |     |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |       |     |     |   |  |  |  |     |       |     |     |  |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |                          |  |  |  |     |       |     |       |  |  |  |  |     |     |     |    |                                  |  |  |  |     |       |     |     |                                    |  |  |  |     |       |     |     |                                |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |                 |  |  |  |     |     |     |     |                               |  |  |  |     |    |     |    |                                     |  |  |  |     |     |     |     |  |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |                           |  |  |  |     |     |     |    |                      |  |  |  |     |   |     |   |   |  |  |  |                      |  |  |  |  |  |  |  |                      |  |  |  |  |  |  |  |                                    |  |  |  |  |                     |  |  |                       |  |  |  |  |                     |  |  |   |  |  |  |  |  |  |  |

## Submitted By

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**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re application of: **Viktor ROSCHE**

Application Serial No.: Not assigned Art Unit: Not assigned

Filed: Concurrently herewith Examiner: Not assigned

For: **29 Human Cancer Associated Proteins** Attorney Docket No.: **PA004P1**

**STATEMENT UNDER 37 C.F.R. 1.821(f)**

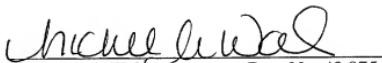
Commissioner for Patents  
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Sir:

Applicants hereby certify that the hard copy of the sequence listing being filed concurrently herewith and the enclosed computer-readable form of such sequence listing are identical.

Respectfully submitted,

Date: 12/21/01

  
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